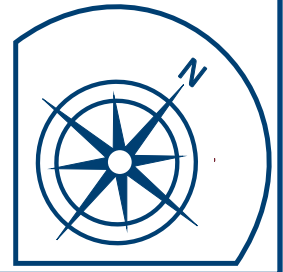


True North

Newsletter of the VA National Center for Ethics in Health Care

Issue 3, March/April 2017



Letter from the Director

Dear Colleagues,

In January of this year, I had the privilege of attending an intensive Goals of Care Conversations train-the-trainer session in Minneapolis — one of a number of such trainings that will take place in VA over the next 18 months. Goals of care conversations between providers and patients are an essential part of our new Life-Sustaining Treatment Decisions Initiative, a national VHA quality improvement project led by NCEHC. This ground-breaking initiative standardizes practices related to discussing and documenting seriously ill Veterans' goals of care and life-sustaining treatment decisions. You can read more about this important work on pages 2 and 3.

The NCEHC moral distress initiative continued its roll-out on March 2 with an Ethics and Professionalism Grand Rounds webinar on "The Role of Courage and Culture." In our final webinar of the series on June 5, Dr. Cynda Rush-ton will speak on cultivating resilience as a way to counter moral distress.

Compliance and Ethics Week takes place May 1–5 throughout VA. This year's theme is "Being Our Best for Veterans." The purpose of this week, co-sponsored by NCEHC and the Office of Compliance and Business Integrity, is to highlight the importance of ethics quality and business integrity in providing the best care to our nation's Veterans. Observances and activities will take place at VA facilities around the country. I urge all staff to participate in the week's activities.

Last month, NCEHC deputy director Toby Schonfeld and I had the opportunity to spend some time with the Seattle branch of our program office. It was a rewarding experience to engage in lively conversations about applying

LEAN principles to our work at the Center. We have started using LEAN practices to improve the performance of our processes and support more effective collaborations throughout VA.

Finally, I would like to thank Dr. Melissa Bottrell for her many years of dedication to ethics in VA. As Chief of IntegratedEthics,[®] Melissa brought her incredible knowledge and deep commitment to the continual improvement of health care ethics. I know that we will all miss her daily contributions to IE, our Center and VA. We wish her the best in her post-NCEHC life.

—Lisa S. Lehmann, MD, PhD



NCEHC Deputy Director Dr. Toby Schonfeld, moderator, (left) and NCEHC Executive Director Dr. Lisa Lehmann, speaker, at the VACO studio for the Ethics and Professionalism Grand Rounds broadcast on Moral Distress, Part II.



U.S. Department of Veterans Affairs
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Life-Sustaining Treatment Decisions Initiative Puts VA at the Forefront of Patient-Centered Care

In January 2017, VA launched the Life-Sustaining Treatment Decisions Initiative (LSTDI), a far-reaching change in clinical practice that brings the patient's voice, goals and values to the forefront of treatment decisions for Veterans with a serious illness. "This initiative is about doing what is right for patients and ensuring that our VA staff have the communication skills and tools to be successful in doing so," said NCEHC Executive Director Lisa Lehmann, MD, PhD.

LSTDI is a VA-wide effort to consistently elicit, document, and honor Veterans' goals of care and decisions about life-sustaining treatments. NCEHC worked collaboratively over the past four years to develop, test and improve the initiative and its implementation at four demonstration facilities: Lovell Federal Health Care Center in North Chicago, IL; VA Black Hills Health Care System, ND; VA Salt Lake Health Care System, UT; and William S. Middleton Memorial VA Hospital in Madison, WI. "Working with the demonstration sites helped improve every single aspect of the initiative. There was no way to know in advance some of the things that we learned," said NCEHC Ethics Policy Consultant Jill Lowery, PsyD.

[LSTDI](#) encompasses a national policy, multiple training programs and materials, checklists and job aids, and new templates and workflows in CPRS (the VA patient medical record). These resources are all aimed at providing better patient-centered care for Veterans with serious illness. The initiative codifies practices and expectations for life-sustaining treatment decisions, including parameters for when a goals of care conversation should take place and requirements for what that conversation should include. Life-sustaining treatment orders, which document critical decisions made during a goals of care conversation, now default to the top the patient's orders list in CPRS.

Additionally, those orders do not expire and follow the patient from one health care setting to another — so they remain visible and easy for providers to find at all times.

"If we really want to make sure that Veterans get care that matches their wishes and preferences, then we have to ask what's important to them and make recommendations about treatment that fits that," observed Shaída Talebreza, MD, FAAHPM, AGSF, a geriatric and palliative care physician at Salt Lake City VAMC. "We need to be good at these conversations and then match treatments to Veterans' wishes. This initiative helps make that happen, in a way that no other health care system does."



Dr. Shaída Talebreza speaks about the importance of goals of care conversations in the video "Leading the Way on the Life-Sustaining Treatment Decisions Initiative"

To learn about the LSTDI demonstration site experience and hear directly from VA staff who implemented the initiative at their facilities, watch the 10-minute video, "[Leading the Way on the Life-Sustaining Treatment Decisions Initiative](#)."

LSTDI Resources

NCEHC has a wealth of resources available for the national rollout of the Life-Sustaining Treatment Decisions Initiative. These resources are available on four LSTDI web pages:

[Overview and Policy](#) — Covers the background for the initiative, including testing and ethical standards that went into developing it. Resources on this page cover what the policy is and why it is important, such as the

[Crosswalk of Policy Changes](#), explaining the differences between the new policy and the policy it replaces.

[Resources for Facilities](#) — Contains helpful information for facility leadership and ethics staff to support implementation of the policy, such as the [Implementation Guide](#), a detailed step-by-step guide describing actions and changes required to successfully implement the LSTDI.

(Resources continue on page 3)

LSTDI Resources

(Continued from page 2)

Resources for Clinical Staff Caring for High-Risk Patients

— Features resources for clinicians about conducting goals of care conversations and honoring patient decisions, such as the Goals of Care Conversations [Pocket Card](#), which outlines the steps for conducting a conversation with patients or surrogates about the patient's values, goals, and life-sustaining treatment decisions.

For Clinical Application Coordinators/Health Informatics Specialists Installing LST Tools in CPRS

(Intranet only) — Includes a step-by-step application guide for the national standardized progress note template and order set and a schedule of installation support teleconferences, as well as other resources.

All of the above information, along with a list of LSTDI implementation coordinators and goals of care

conversations trainers in each VA facility, can be accessed from links on the [LSTDI intranet home page](#).



Goals of care conversations allow doctors to learn the treatment goals and type of care their patients would like to receive early in the treatment process.

Dr. John P. Billig Receives 2016 William A. Nelson Award

John P. Billig, PhD, ABPP, is the recipient of the 2016 William A. Nelson Award for Excellence in Health Care Ethics. Dr. Billig was recognized for his numerous efforts in training and mentoring as well as his long-term commitment to promoting ethical health care practices in VHA.

A clinical psychologist and psychology supervisor at Minneapolis VA Health Care System (MVAHCS), Dr. Billig is also a health care ethicist and co-chair of the MVAHCS ethics consultation service. He is a member of the VISN 23 IE advisory board and contributes to the ongoing development of VISN IE leaders.

"Dr. Billig is a leader and champion of supporting and promoting our ethics environment," said MVAHCS director Patrick J. Kelly, FACHE, at an award ceremony held on the MVAHCS campus. "He is a resource at the VISN level and an educator, trainer, mentor and coach to many of our staff."

Dr. Billig leads the VISN Ethics Consultation Mentoring program, which develops consultative services within VISN 23 and provides training, coaching, and support for all consultative staff. He was a faculty member at



Dr. John Billig (L) and MVAHCS Director Patrick J. Kelly, FACHE

Ethics Consultation Beyond the Basics trainings for the past three years, and provides similar trainings at MVAHCS.

"Thank you to the Nelson Award selection committee, NCEHC, and to all my ethics colleagues in Minneapolis and VISN 23 who nominated me," said Dr. Billig at the ceremony. "I am so touched and awed that you thought me worthy of this award."

Around the Center . . .

Highlights from the Learning Resources Catalog

In this issue, we feature the **2017 Activity Guide for IE Staff** for [National Compliance and Ethics Week](#) (C&E Week), which takes place May 1-5, 2017.

C&E Week, sponsored by NCEHC and the [Office of Compliance and Business Integrity](#), highlights the importance of organizational integrity, business compliance and ethics quality in providing the best service and care to our

nation's Veterans. The Activity Guide contains tools and resources for C&E Week celebrations and activities held at VA facilities nationwide.

You can access the Activity Guide and other C&E Week tools and resources through the [NCEHC Learning Resources Catalog](#).

Nominations Open for 2017 Nelson Award

NCEHC is pleased to invite nominations for the 2017 [William A. Nelson Award for Excellence in Health Care Ethics](#). This award recognizes an individual who has demonstrated a long-term commitment to promoting ethical health care practice in VHA through excellence, dedication and accomplishment in the field of health care ethics.

The deadline for nominations is April 14, 2017. [Click here to download the nomination package](#).



2016 William A. Nelson Award

What We're Reading

This commentary looks at the way VA hospitals differ from private hospitals: they provide a community of patients, practitioners and programs that Veterans would not likely find outside of the VA system. Geppert, C. (2017, February). [The VA Is Not Just a Hospital, It Is a Community](#). *Federal Practitioner*, 8-9.

"Can We Agree to Disagree?" tells the story of a geriatrician whose advance care planning discussion with her

grandparents reveals an unexpected paradox: surrogates feel they can override the clear preferences stated in a patient's living will despite saying that they hear and understand those preferences. Patients are willing to support that approach if it makes surrogates feel better about the decision. Sudore, R. L. (2009, October 32). [Can We Agree to Disagree?](#) *JAMA*, 1629-1630.

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This newsletter is produced by the National Center for Ethics in Health Care.

Current and archived issues of *True North* can be found on NCEHC's [True North page](#). Archived issues of the *IE in Action* newsletter are available at NCEHC's [IE in Action page](#).